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Substitute for Form PTO-875										^	Application or Docket Number 9			
APPL		LICATION AS FILED - (Column 1)		PART I (Column 2)		_	SMALL ENTITY			OR		OTHER THAN SMALL ENTITY		
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MULTIPLE DEPEN	IDENT CLAIM	PRESENT (3	7 CFR 1.16(i))		1				-	┝			
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If the difference in column 1 is less than zero, enter "0" in column 2.							TOTA	L				TOTAL		
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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